NEEDS ASSESSMENT SURVEY FINDINGS FORM

Planning Area: North/Northeast Texas

BDTP: IDU Men

HMAZ/LMAZ Area: Rural North
SUBPOPULATION: Hispanic (1,12)

	# of surveys completed: 39	
	Information from needs assessment surveys	Assessment
Risk Behaviors (13,15,16, 22,24,25, 26,27,28,29 30,33)	 41% reported more than 3 partners in the past year. 9% reported at least one of their sex partners in the past year now had HIV. 7% reported at least one of their sex partners in the past year had an STD. 45% revealed that if they tested HIV positive, they would know who they got it from. 50% reported that if they tested positive for an STD, they would know who they got it from. 21% say they had been treated for an STD in the past year. One-third reported engaging in anal sex. Of those engaging in anal sex, 13% reported sometimes using a condom and 23% reported almost never using a condom for anal sex. 68% percent never use a condom for oral sex. 51% never use a condom for vaginal sex. The four locations where this Hispanic IDU Men engaged in anal sex are (in order): at home [74%]¹, someone else's home [56%], cars/vehicles [39%], hotels/motels [26%]. The top five things Hispanic IDU Men said they do to keep from getting HIV are (in order): having one sex partner [39%]¹, sometimes use condoms [31%]. don't inject drugs [28%], don't abuse drugs or alcohol [26%], don't share needles or works [26%], bleaching needles [23%]. Survey respondents indicated the same pattern for protection against STDs. 	 High proportion of the population reported they have engaged in sex with multiple partners. There is a high prevalence of HIV and STDs in the population based on the morbidity profile for this population. A large proportion indicated they knew who gave them HIV or an STD if they tested positive for HIV or diagnosed with an STD. Reported condom use, particularly with oral and vaginal sex is much higher than observed in other populations. While public locations were indicated as places where Hispanic IDU Men indicated they engaged in sex, a higher proportion indicated these activities occur in more private locations. This should be taken into account when trying to reach this population.

Numbers noted in parentheses () indicate questions number on the needs assessment survey which correspond to that category.

^{*}Denotes the factors that influence behaviors (FIBs). See Tab 8 TDH Insert, Selecting and Prioritizing Interventions for a more detailed description.

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*Knowledge (9,11)	 Among Hispanic IDU Men: 90% indicated that anal sex without a condom may increase a person's chance of getting HIV, 67% for getting STDs other than HIV. 69% and 97% indicated that oral and vaginal sex without a condom, respectively, may increase a person's chance of getting HIV, 74% and 80%, respectively, for getting STDs other than HIV. 90% indicated that sex-trade work may increase a person's chance of getting HIV, 77% for getting STDs other than HIV. 90% indicated that unprotected sex under the influence may increase a person's chance of getting HIV, 77% for getting STDs other than HIV. 92% indicated sex with more than one partner may increase a person's chance of getting HIV, 80% for getting STDs other than HIV. 100% indicated that injecting drugs and sharing works may increase a person's chance of getting HIV, 62% for getting STDs other than HIV. 90% indicated that having sex with men may increase a person's chance of getting HIV, 77% for getting STDs other than HIV. 95% indicated that engaging in sex with a woman who has engaged in risky behaviors may increase a person's chance of getting HIV, 85% for getting STDs other than HIV. 80% indicated that blood transfusions may increase a person's chance of getting HIV, 31% for getting STDs other than HIV. 87% indicated that needle sticks may increase a person's chance of getting HIV, 33% for getting STDs other than HIV. 87% indicated that needle sticks may increase a person's chance of getting HIV, 33% for getting STDs other than HIV. 92% indicated that a being born to a mother with HIV may increase a person's chance of getting Born to a mother with HIV may increase a person's chance of getting Born to a mother with HIV may increase a person's chance of getting BIV, 	The majority of the population showed good knowledge of HIV transmission routes. Blood transfusions and needle stick transmissions were the modes with the least knowledge about. While some members of the sub-population need better knowledge skills, generally, this community shows good knowledge of HIV and STD transmission routes, given these risks.
*Attitudes & beliefs (10,32,34)	 67% for getting STDs other than HIV. On average, Hispanic IDU Men indicated they agreed or strongly agreed that a person should tell their sex partner(s) if they have HIV when not using condoms. On average, Hispanic IDU Men indicated they agreed or strongly agreed that a person should tell their sex partner(s) if they have HIV when using condoms. 	Most respondents in the survey indicated a strong motivation to discuss HIV and STD risks if they are infected.

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	 On average, Hispanic IDU Men indicated they agreed or strongly agreed that a person should tell their sex partner(s) if they have an STD other than HIV when not using condoms. On average, Hispanic IDU Men indicated they agreed or strongly agreed that a person should tell their sex partner(s) if they have an STD other than HIV when using condoms. The top three reasons Hispanic IDU Men indicated they had sex without a condom are (in order): don't like condoms [54%]¹, trust partner [31%], being under the influence [28%]. 53% indicated they were not likely to get HIV, and 56% indicated they were not likely to get an STD. 	 Primary barriers to condom use were trust in partner, monogamy, don't like condoms, partner's refusal to use condoms. Considering the low morbidity rates in this community, the personal perception of risk is average.
*Current communication skills	 24% of the Hispanic IDU Men who responded indicated they have talked about getting HIV with some of their partners. 19% of the Hispanic IDU Men who responded indicated they have talked about getting an STD other than HIV with at-least some of their partners. 	Most of the Hispanic IDU Men indicated they should discuss if they had an STD or HIV with their partner.
*Social/peer support (17)	When asked who they would tell if they had contracted HIV or an STD other than HIV, the following proportions of Hispanic IDU Men indicated they would tell: • Their family; 39% for HIV, 9% for an STD. • Their current partner(s); 24% for HIV, 6% for an STD. • Their past partner(s); 29% for HIV, 5% for an STD. • Their friends; 29% for HIV, 12% for an STD.	A significant portion of the population reported they would be not be comfortable telling family, friends and partners if they contracted HIV. The proportion indicating the same reluctance to discussion about an STD infection was significantly lower.
Testing history/need for testing (18-23)	 61% of survey respondents indicated they have tested for HIV in the past year. Of those who were tested, they tested an average of 1.5 times a year. The top three reasons Hispanic IDU Men indicated they tested were (in order): had sex without condom [26%], part of routine care [21%], doctor or nurse noticed an HIV related problem [8%]. 7% of the respondents indicated they have tested positive for HIV. 43% of the respondents tested for an STD other than HIV in the past year. Of those testing, they tested an average of 1.3 times per year. 43% of Hispanic IDU Men who have tested for an 	 Testing proportions in this population are good, both in terms of the proportion tested, and the frequency of test, even though the majority of the population has only one partner in that time period. A large proportion of respondents indicated a preventive behavior, part of routine care. All other reasons were due to potential failures of prevention activities.

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	STD in the past year indicated they have tested positive for an STD. 21% of respondents indicated they have been treated for an STD in the past 12 months. • 18% of respondents indicated they have tested for Hepatitis A in the past year, 44% for Hepatitis C, 21% for Hepatitis B, and 44% tested for Tuberculosis.	 Few respondents indicated any barriers as to why they were not tested. High self-identified positivity rate. This may be an artifact of the sampling strategy, but current morbidity estimates indicate nearly 10% of the population has a known HIV or AIDS diagnosis. A high proportion of the respondents indicated they felt the need to be tested for an STD in the past year. The frequency of testing (twice a year for those who tested) is similar to the average number of partners reported. Between a quarter and a third of this sub-population indicate they have been tested for other diseases in the past year. This supports the critical nature of referrals to appropriate providers.
Prevention services currently accessed (19,21) Note: For testing, community-based organizations and corrections were not provided as a response option.	 The top four locations Hispanic IDU Men go for an HIV test are (in order): public STD clinic [26%], jail/prison [15%], doctors office [13%]. The top location Hispanic IDU Men go for an STD examination is: public STD clinic [15%]. 28% of respondents indicated barriers in their community to seeking prevention services. These include (in order): town or community is too small [15%], lack of HIV or STD program in the community [10%], family or friends might find out [10%]¹, inconvenient hours when programs are offered [10%]. The top five locations where Hispanic IDU Men have gotten HIV and STD information are (in order): treatment centers [26%], public health clinics [23%], community counseling and testing centers [15%], local HIV/AIDS organization [10%], family or friends [10%]. 	 The primary source for HIV testing and STD diagnosis and treatment are through public STD clinics, jails/prison, and doctors' offices. Living in a small town with little or no HIV/STD programs and services, confidentially issues, and inconvenient hours of operation were cited as barriers to access services. In contrast to testing and diagnosis services, prevention information and helpful information was primarily obtained public health providers, community-based organizations, and family and

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	 The top four locations where Hispanic IDU Men have gotten information on HIV that has helped them are (in order): public health clinics [26%], treatment centers [21%], community counseling and testing centers [18%], local HIV/AIDS organization [13%]. The top four locations where Hispanic IDU Men have gotten information on STDs that has helped them are the same as that for HIV information. 	friends.
Prevention needs (35-39)	 For those indicating they wanted to know more to help protect them from acquiring HIV, the following activities were requested (in order): basic information on HIV/STDs [41%], drug abuse counseling and treatment [31%], how to clean needles and works [26%], how to have safe sex [23%], want to know how to talk with their partner(s) about using condoms [21%]¹. Primary locations where Hispanic IDU Men indicated they would get information on HIV in the future are (in order): public health clinics [56%], local HIV/AIDS organizations [54%], community counseling and testing centers [49%], telephone hotlines [46%], treatment centers [46%]. Primary locations where Hispanic IDU Men indicated they would get information on STDs in the future are (in order): public health clinics [54%], community counseling and testing centers [46%], local HIV/AIDS organizations [44%], treatment centers [41%], other health clinics [41%]. Primary locations where Hispanic IDU Men indicated they would NEVER get information on HIV in the future are (in order): church [44%]¹, work [41%], bars [36%], bath houses [31%], school [26%]. Primary locations where Hispanic IDU Men indicated they would NEVER get information on STDs in the future are (in order): church [44%]¹, work [41%], bars [36%], bath houses [210], school [26%]. Primary locations where Hispanic IDU Men indicated they would NEVER get information on STDs in the future are (in order): church [39%]¹, work [39%], bars [31%], bath houses [26%], school [23%]. 	 Basic HIV and STD information lead the activities wanted by Hispanic IDU Men, followed by drug abuse counseling and treatment, how to clean needles and works, how to have safe sex, and communication skills. The primary locations where Hispanic IDU Men indicated they would go to get HIV and STD information are public health clinics, local HIV/AIDS organizations, community counseling and testing center, and treatment centers. The locations where Hispanic IDU Men would never seek HIV or STD prevention messages are church, work, bars, bath houses, and school

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Specific Information about HIV ⁺ from HIV ⁺ risk profiles	 Statewide, 33% of IDU Men Hispanic HIV positive individuals indicated they never used a condom for anal sex, 53% for vaginal sex, and 67% for oral sex. Nearly 20% indicated an STD diagnosis in the past year. Over 57% indicated more than 1 sex partners in the past year. Over 10% indicated some sex trade work in the past year. 89% indicated substance use with sex in the past year. Over three-fourths indicated their partners were at risk, and nearly 60% indicated their partners had multiple partners. The top drugs used during sex were: alcohol [67%]¹, cocaine [58%] and heroine [45%]. In the Rural North, all IDU Men indicated: There was no mention of never using a condom for anal sex. None indicated an STD diagnosis in the past year. 13% indicated they had more than 1 partner in the past year. A quarter indicated sex trade in the past year. All indicated substance use with sex in the past year. All indicated their partner was at risk, and a quarter indicated their partners had multiple partners. The top drugs used during sex were: alcohol [50%]¹, marijuana [38%], cocaine [25%], amphetamines [25%]. 	 The proportion of Hispanic IDU Men positives reporting never using a condom for anal sex is nearly 1.5 times that reported for Hispanic IDU Men by the needs assessment. Condom use for vaginal and oral sex are similar between positives and negative Hispanic IDU Men. The proportion of HIV positives with a recent STD diagnosis is significantly high, particularly considering the high proportion (57%) with multiple sex partners. Over three-fourths of HIV positives indicated their sex partner was at risk. The drugs of choice for HIV positives are alcohol, marijuana, cocaine, heroin, and amphetamines.
Other		

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